## Merrillville Parks Recreation Program Evaluation

Please take a few minutes to fill out this evaluation. We have had many changes and we are always looking for information on how to better our programs. With the following information completed, we feel that this feedback will help us a great deal in making the programs that interest you the best they can be.

## Name of Program you are evaluating:

	Excellent		Average		Poor	(circle one)			
Safety Facility	5	4	3	2	1	(circle offe)			
Age Group	5	4	3	2	1				
Class Time	5	4	3	2	1				
Quality of Instructor	5	4	3	2	1				
Overall Organization	5	4	3	2	1				
Registration Process	5	4	3	2	1				
Value/Fees	5	4	3	2	1				
Is the program what yo			Yes		No	(circle one)			
Have you or other family members been involved with more than one program? Yes No NA									
Where did you hear ab	out this pro	gram?							
Brochure Flyer		riend		Newspa	aper	Website		Other	
Was there anything that you specifically did or didn't like about this program?									
How would like to see the program improve?									
now would like to see the program improve:									
Is there a program that you would like offered?									
What time of day do	ou profor to	attend :	ny program?	Mornin	a	Afternoon		Evanin	•
What time of day do yo	ou preier (0	attend a	any program:	Mornin	ಕ	AILEITIOOII		Evening	3

Thankyou for taking the time to fill out this evaluation. You can turn this in at the Pruzin Community Center Office.